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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below. 26 Charles Street Natic, MA 01760 MAUREEN (Signature) APPLICATION NO. FILING DATE FIRST NAMED INVENTOR CONFIRMATION NO. ATTORNEY DOCKET NO. JEFFREY CONKLIN 09/702 062 10/30/2000 ET00-001CIP 8312 TITLE OF INVENTION: SYSTEM AND METHOD FOR AN AUTOMATED SYSTEM OF RECORD APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION PER TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1330 SU. \$1330 10/25/2004 EXAMINER ARTUNIT CLASS-SUBCLASS MEINICKE DIAZ, SUSANNA M 3623 705-080000 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list 1 MAUREEN JTRETTH (1) the names of up to 3 registered patent attorneys Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attempty or agent) and the names of up to 2 registered patent attemptys or agents. If no name is O "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE
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